

11-00  
8/22/94

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MW	6704	95/07/10
O.I.P.E. CLASSIFIER	MWD	45	10/14
FORMALITY REVIEW	MB	8003	10/14
RESPONSE FORMALITY REVIEW			0.35 .00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
Final	1/24/95
Original	8/11/94
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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